



PTO/SB/22 (10-04)

Approved for use through 7/31/2006. OMB 0651-0031

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|   |            |  |           |
|---|------------|--|-----------|
| <b>PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)</b><br><b>FY 2005</b><br>(fees effective on or after October 1, 2004)   |            | <b>Docket Number (Optional)</b><br>29757/P-686 |           |
| Application Number 10/085,779-Conf. #2052   |            | Filed February 28, 2002                        |           |
| For ELECTRONIC JACKPOT ADMINISTRATION METHOD AND SYSTEM   |            |  |           |
| Art Unit 3714   |            | Examiner Mark Alan Sager                       |           |
| This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.<br>The requested extension and fee are as follows (check time period desired and enter the appropriate fee below): |            |  |           |
|   | <u>Fee</u> | <u>Small Entity Fee</u>                        |           |
| <input type="checkbox"/> One month (37 CFR 1.17(a)(1))  | \$110.00   | \$55.00  | \$        |
| <input type="checkbox"/> Two months (37 CFR 1.17(a)(2))   | \$430.00   | \$215.00                                       | \$        |
| <input checked="" type="checkbox"/> Three months (37 CFR 1.17(a)(3))  | \$980.00   | \$490.00                                       | \$ 980.00 |
| <input type="checkbox"/> Four months (37 CFR 1.17(a)(4))  | \$1,530.00 | \$765.00                                       | \$        |
| <input type="checkbox"/> Five months (37 CFR 1.17(a)(5))  | \$2,080.00 | \$1,040.00                                     | \$        |
| <input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27.   |            |  |           |
| <input checked="" type="checkbox"/> A check in the amount of the fee is enclosed.   |            |  |           |
| <input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.   |            |  |           |
| <input type="checkbox"/> The Director has already been authorized to charge fees in this application to a Deposit Account.  |            |  |           |
| <input checked="" type="checkbox"/> The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number 13-2855. I have enclosed a duplicate copy of this sheet.                             |            |  |           |
| I am the <input type="checkbox"/> applicant/inventor.   |            |  |           |
| <input type="checkbox"/> assignee of record of the entire interest. See 37 CFR 3.71.<br>Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).   |            |  |           |
| <input type="checkbox"/> attorney or agent of record. Registration Number _____   |            |  |           |
| <input checked="" type="checkbox"/> attorney or agent under 37 CFR 1.34(a).<br>Registration number if acting under 37 CFR 1.34(a) 38,851  |            |  |           |
| _____<br>Signature  |            | December 7, 2004<br>Date                       |           |
| Paul C. Craane<br>Typed or printed name   |            | (312) 474-6300<br>Telephone Number             |           |
| NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.   |            |  |           |
| <input type="checkbox"/> Total of 1 forms are submitted.  |            |  |           |

I hereby certify that this correspondence is being deposited with the U.S. Postal Service with sufficient postage as First Class Mail, in an envelope addressed to: MS Amendment, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on the date shown below.

Dated: December 7, 2004

Signature: \_\_\_\_\_ (Paul C. Craane)